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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 29610/CDT496
Application Number	10/588,050-Conf. #3599	Filed February 7, 2005 (Int'l. Appl. No. PCT/GB2005/000429)
For Molecular Electronic Device Fabrication Methods And Structures		
Art Unit 1715	Examiner	J. Lin
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$150	<u>Small Entity Fee</u> \$75
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$560	\$280
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1270	\$635
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1980	\$990
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2690	\$1345
		\$ 2,690.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-2855</u> .		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>46,130</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>/Andrew M. Lawrence/</u> Signature		March 5, 2012 Date
<u>Andrew M. Lawrence</u> Typed or printed name		(312) 474-6300 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/>	Total of <u>1</u>	forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with 37 CFR § 1.6(a)(4).

Dated: March 5, 2012

Signature: /Andrew M. Lawrence/ (Andrew M. Lawrence, Reg. No 46,130)